PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FFF and PURI ICATION FFF (if required). Blocks I through 5 should be complete.

maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate	Note: A certificate of mailing can only be used for domestic mailings of the		
	90 03/28/2006	01	PE	Fee(s) Transmittal. papers. Each additi have its own certifi	This certificate cannot be used onal paper, such as an assignm cate of mailing or transmission	for any other accompanying	
	& FRY CO. L.P.A. ROAD	JUN	1 3 2006	I hereby certify tha States Postal Service addressed to the Machine I	Certificate of Mailing or Trant this Fee(s) Transmittal is being with sufficient postage for final Stop ISSUE FEE addres USPTO (571) 273-2885, on the	nsmission ng deposited with the United irst class mail in an envelope is above, or being facsimile date indicated below.	
WILLOUGH HIL	LL3, OH 44094	TO THE	ADDA ARTHUR	/		(Depositor's name)	
			autre:			(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMI		INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/934,886 TITLE OF INVENTION: ST	08/22/2001 FATELESS MESSAGE PRO	OCESSING SCHE	Jean Louis (EME FOR NET	-	RAL920010026US1 ITERACTIONS	8162	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	06/28/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS	\neg		
ISMAIL, SHAWKI SAIF		2155		709-246000			
FR 1.363). Change of correspond Address form PTO/SB/12 Tee Address" indicates	e address or indication of "Fe lence address (or Change of 0 22) attached. ion (or "Fee Address" Indica or more recent) attached. Use	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
			data will appe T a substitute f		ignee is identified below, the	document has been filed for	
	nal Business Corporation assignee category or categor			Armonk, N tent): 🗖 Individual 🌡	Y Corporation or other private g	roup entity Government	
			b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0563 (enclose an extra copy of this form).				
a. Applicant claims SI	(from status indicated above, MALL ENTITY status. See 3	7 CFR 1.27.	b. Applica	nt is no longer claiming SM	1ALL ENTITY status. See 37 (CFR 1.27(g)(2).	
OTE: The Issue Fee and Pu	ublication Fee (if required) w	ill not be accepted	d from anyone	other than the applicant; a r	usly paid issue fee to the applic egistered attorney or agent; or	the assignee or other party in	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Hogg

Typed or printed name William N

Authorized Signature

1400.00 DA

20, 1389600 DA

RegistRidion 1504